

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 4
 For use by Members, officers, and employees

HAND DELIVERED

Robert A. Brady
 (Full Name)

202-225-4731
 (Daytime Telephone)

2011 MAY 16 PM 4:59

MC

Filer Status

☒ Member of the U.S. House of Representative

State: PA
 District: 01

☐ Officer Or Employee

Employing Office:

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts--</p>	<p>Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions--</p>	<p>Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

SCHEDULE I - EARNED INCOME

Name Robert A. Brady

Page 2 of 4

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Philadelphia Redevelopment Authority	Spouse Pension	N/A
Philadelphia Writ Service	Spouse Salary	N/A
Independence Blue Cross	Spouse Consulting	N/A
City of Philadelphia	Pension	\$8,727
University of Pennsylvania	Approved Teaching Fee	\$3
Carpenters Pension Fund of Philadelphia	Pension	\$17,294

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert A. Brady

Page 3 of 4

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or		Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Transaction indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
	Brigadoon Motel, LLC	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
	Carpenters Pension	\$250,001 - \$500,000	Other: (Pension)	\$15,001 - \$50,000	
	City of Philadelphia	\$50,001 - \$100,000	Other: (Pension)	\$5,001 - \$15,000	
SP	D&B Investment, Inc.	\$1 - \$1,000	None/Other: Corp	NONE	
	PA Turnpike	\$15,001 - \$50,000	None/other: pension	NONE	
SP	Philadelphia Federal CU	\$250,001 - \$500,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert A. Brady

Page 4 of 4

	Philadelphia Federal CU	\$500,001 - \$1,000,000	INTEREST	\$5,001 - \$15,000	
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**UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT**

FORM A Page 1
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2011 MAY 12 PM 2:12

MC

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Chaka Fattah
(Full Name)

202.225.4001
(Daytime Telephone)

Filer Status

☒ Member of the U.S. House of Representatives
State: PA
District: 02

☐ Officer Or Employee
Employing Office:

Report Type

☒ Annual (May 15) ☐ Amendment ☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

SCHEDULE I - EARNED INCOME

Name Chaka Fattah

Page 2 of 4

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
General Electric	Spouse Salary	N/A
PA State Employee Retirement System	Self - Pension	\$4,586

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Chaka Fattah

Page 3 of 4

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or</p>		<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
SP	GE Common Stock	\$100,001 - \$250,000	Other: 401 (K)	NONE	N/A
S	PA State Employee Retirement System	\$50,001 - \$100,000	Other: Pension reported as income	\$2,501 - \$5,000	N/A

SCHEDULE VIII - POSITIONS

Name Chaka Fattah

Page 4 of 4

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
S: Board Member	Philadelphia Futures

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

Page 1 of 5

LEGISLATIVE RESOURCE CENTER

2011 MAY 13 AM 9:41

Jason Altmire
(Full Name)

202-225-2565
(Daytime Telephone)

HAND DELIVERED

(Office Use Only)

MC

Filer
Status

☒ Member of the U.S.
House of Representatives

State: PA
District: 04

☐ Officer Or
Employee

Employing Office:

Report
Type

☒ Annual (May 15) ☐ Amendment ☐ Termination

Termination Date:

**A \$200 penalty shall
be assessed against
anyone who files
more than 30 days
late.**

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VII.
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule III.	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule VIII.
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IV.	IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule V.	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions-	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

Name Jason Altmire

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honorarie; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
AARP	Spouse Salary	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jason Altmire

BLOCK A

Asset and/or Income Source

Identify (s) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.

Provides complete names of stocks and mutual funds (do not use ticker symbols.)

For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.

For rental or other real property held for investment, provide a complete address.

For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

Excludes: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or

BLOCK B

Year-End Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."

BLOCK C

Type of Income

Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.

BLOCK D

Amount of Income

For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.

BLOCK E

Transaction

Indicate if asset had purchases (P), sales (S), or exchange (E) exceeding \$1,000 in reporting year.

SP	T. Rowe Price 401(K), as follows:	None		NONE	
SP	TRP Blue Chip Growth	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
SP	TRP Mid Cap Growth	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
SP	TRP Retirement 2035	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
SP	Charles Schwab IRA, as follows:	None		NONE	
SP	Ariba Stock (Charles Schwab fund)	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jason Altmire

SP	Disney Stock (Charles Schwab fund)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000
SP	Janus Balanced Fund (Charles Schwab Fund)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000
SP	Sirius XM Radio Stock (Charles Schwab Fund)	\$1,001 - \$15,000	None	NONE
JT	Citizens Bank Account	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000
JT	Congressional Federal Credit Union Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200

SCHEDULE VIII - POSITIONS

Name Jason Altmire

Page 5 of 5

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Lawrence County Social Services
Advisory Board	Penn State Beaver
Board	University of Pittsburgh Institute of Politics

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

Page 1 of 5 LEGISLATIVE RESOURCE CENTER

2011 MAY 16 PM 12:38

Glenn W. Thompson Jr.

202-225-5121

(Full Name)

(Daytime Telephone)

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

Filer
Status

☒ Member of the U.S.
House of Representatives

State: PA
District: 05

☐ Officer Or
Employee

Employing Office:

**A \$200 penalty shall
be assessed against
anyone who files
more than 30 days
late.**

Report
Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

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II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Glenn W. Thompson Jr.

Page 2 of 5

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or</p>		<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
JT	606 Walnut Street Howard, Pennsylvania (Rental Property)	\$50,001 - \$100,000	RENT	\$5,001 - \$15,000	
DC	Money Market Account Sovereign Bank	\$50,001 - \$100,000	Interest	\$201 - \$1,000	
	National Western Life Insurance (Fixed Index Annuity) Rolled Over from Prudential	\$100,001 - \$250,000	NA	NA	
	Prudential 401 K Retirement Plan (not self-directed) Rolled over to National Western Life Insurance Company noted above	\$100,001 - \$250,000	NA	NA	

SCHEDULE V - LIABILITIES

Name Glenn W. Thompson Jr.

Page 3 of 5

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
DC	Sallie Mae	September 2008	Education Loan for son (Kale)	\$15,001 - \$50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Glenn W. Thompson Jr.

Page 4 of 5

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
The Heritage foundation	January 14 - 16, 2010	DC-Charlotte, VA	Y	Y	Y	3 Days
Fu Jen Catholic Unniveristy	November 6 - 13, 2010	DC-Taiwan-DC	Y	Y	Y	8 Days

FOOTNOTES

Name Glenn W. Thompson Jr.

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Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Rollover from Prudential to National Western Life Insurance (Fixed Index Annuity)	

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

Form A
 For use by Members, officers, and employees

Page 1 of 9

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

Name: PATRICK L. MEEHAN

Daytime Telephone: 202-225-2011

MC 2011 MAY 16 AM 9:56
 OFFICE OF THE CLERK
 U.S. HOUSE OF REPRESENTATIVES

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>PA.</u> District: <u>7TH</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____
Report Type	<input checked="" type="checkbox"/> Annual (May 16, 2011)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date: _____

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

[illegible]

For payments to charity in lieu of honoraria, use Schedule II.

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

[illegible]

Neme

Patrick L. Meehan

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[illegible]

For additional assets and unearned income, use next page.

SCHEDULE III—ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name

Patrick L. Meehan

Page

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SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction	
		A	B	C	D	E	F	G	H	I	J	K	L							I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P, S, E		
		None	\$1 - \$1,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify: e.g. Partnership Income or Farm Income)	None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	\$1,000,001 - \$5,000,000		Over \$5,000,000	
SP	403 (b) - Retirement																																
	Vanguard Windsor II Fund				X										X						X												
	Vanguard Growth + Inc Fund				X										X						X												
	Vanguard Growth Indx Fund				X										X						X												
SP	Catholic Health 403b																																
	• LNL STABLE VAL			X											X						X												
	• PMCO TOTAL RTN INSTL			X											X						X												
	• ARTID INTL eg. A			X											X						X												
	• DAY NY VENTURA A			X											X						X												
	• VNGRD INSTL INOX			X											X						X												
	• HRBR CAP APPR			X											X						X												
JT	FRANKLIN MINT FCU ACCTS			X													X					X											
JT	ABINGTON BANK ACCTS			X													X					X											
	Hillard Lyons Gdvt FUND			X											X							X											
	Black Rock Insd MUR INDX			X											X							X											
	NFS/FMTC IRA Rollover			X											X							X											
	BANK OF AMERICA IRA				X										X								X										

SCHEDULE IV— TRANSACTIONS

Name Patrick L. Meehan

Page 6 of 9

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (i.e., "partial sale").** See example below.

Capital Gains — If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.

Type of Transaction

PURCHASE	SALE	EXCHANGE
----------	------	----------

Check Box if Capital Gain Exceeded \$200

Date
(MO/DAY/YR)
or
Quarterly,
Monthly, or
Bi-weekly, if
applicable

Amount of Transaction

A	B	C	D	E	F	G	H	I	J
\$1,001-\$5,000	\$5,001-\$10,000	\$10,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	Over \$25,000,000

SP, DC, JT	Asset
SP	Example: Mega Corporation Common Stock (partial sale)

X

10-12-10

X

NA

SCHEDULE V— LIABILITIES

Report liabilities of over \$10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor		Date Liability Incurred Mo/Year	Type of Liability	Amount of Liability									
					A	B	C	D	E	F	G	H	I	J
					\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000
	Example:	First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				X						
	NA													

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year. **Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. **Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
<i>Example:</i> Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345
NA		

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

[illegible]

SCHEDULE VIII—POSITIONS

Name

Patrick L. Meehan

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
Council Member	National Holocaust Memorial Museum (effective - May 2011)

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	

HAND DELIVERED**UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT****FORM A** Page 1 of 14
For use by Members, officers, and employeesLouis J. Barletta
(Full Name)570-751-0050
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2011 MAY 13 PM 3:41

(Office Use Only)

**A \$200 penalty shall
be assessed against
anyone who files
more than 30 days
late.**

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representative	State: <u>PA</u> District: <u>11</u>	<input type="checkbox"/> Officer Or Employee	Employing Office
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	Termination Date	

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTION

I. Did you or your spouse have "earned" income (a.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTION

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of each trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

Name Louis J. Barletta

Page 2 of 14

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
City of Hazleton, Pennsylvania	Salary	\$60,775

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

Page 3 of 14

BLOCK A Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or	BLOCK B Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	BLOCK D Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
JT 322 Rocky Road	\$500,001 - \$1,000,000	RENT	\$50,001 - \$100,000	
JT Cash- Capital One bank N.A.	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
JT Cash- Morgan Stanley Bank N.A.	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT Deere & Company	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT Hess Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT Leucadia National Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barietta

Page 4 of 14

JT	Eaton Vance Mutual Funds	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
JT	Ishares Inc.	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Prudential Jennison Focus Fund	\$15,001 - \$50,000	None	NONE	
JT	Prudential S-T Corp Bond Fund	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
JT	Sector SPDR TR SBI Energy	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Sector SPDR TR SBI Technology	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	SPDR Index Shares Funds	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	SPRD Series Trust Barclays	\$50,001 - \$100,000	DIVIDENDS	\$5,001 - \$15,000	
JT	SPDR Series Trust S&P Metals	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	SPDR Series Trust S&P Dividend	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Vanguard Dividend Appreciation	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Vanguard Small Cap Growth ETF	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
JT	Vanguard Small Cap Value ETF	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Wisdomtree TR Emerging Cap Dividend	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

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JT	Wisdomtree Trust International	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Cash- Morgan Stanley Bank N.A.	\$50,001 - \$100,000	INTEREST	\$1 - \$200	
JT	Allergan Inc	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Altria Group Inc	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Apple Inc.	\$1,001 - \$15,000	None	NONE	
JT	Coca-Cola Company	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	ConocoPhillips	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	EMC Corp	\$1,001 - \$15,000	None	NONE	
JT	Insignia System Inc	\$1,001 - \$15,000	None	NONE	
JT	Microsoft Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Norfolk Southern Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Novagold Resources Inc	\$1,001 - \$15,000	None	NONE	
JT	Nucor Corp	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Sandridge Energy Inc	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

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JT	SPDR Gold Trust Gold Shares	\$1,001 - \$15,000	None	NONE	
JT	Blackrock Funds II Strategic Income	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
JT	Ishares S&P Midcap 400 Growth	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
JT	Ishares S&P Midcap 400 Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Ishares Trust Barclays	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Ishares Trust S&P US PFD Stock	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	
JT	Powershares Exchange Traded Fund	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
JT	SPDR Series Trust Barclays	\$50,001 - \$100,000	DIVIDENDS	\$5,001 - \$15,000	
JT	SPDR Series Trust S&P Dividend	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	Vanguard Small Cap Growth ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Vanguard Small Cap Value ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Wisdomtree Trust International	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	IRA- Cash- Capital One Bank N.A.	\$1 - \$1,000	None	NONE	
SP	IRA- Cash- Morgan Stanley Bank	\$1 - \$1,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

Page 7 of 14

SP	IRA- Blackrock Global Allocation Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	IRA- Eaton Vance Mutual Funds Global	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	IRA- Ishares Trust Barclays	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	IRA- Oppenheimer Main Street Small	\$1 - \$1,000	None	NONE	
SP	IRA- Prudential S-T Corp Bond Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	IRA- Sector SPDR TR SBI Tech	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	IRA- Wells Fargo Advantage Utilities	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	IRA- Wisdomtree Trust International	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- iShares- LPL Financial	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	IRA- Berkshire Hathaway Inc	\$1,001 - \$15,000	None	NONE	
	IRA- Bristol Myers Squibb Company	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- CVS Caremark Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- Devon Energy Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- Google Inc	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

Page 8 of 14

	IRA- International Business Machines	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- Merck & Company Inc	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- Microsoft Corp	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- SPDR Gold Trust Gold Shares	\$1,001 - \$15,000	None	NONE	
	IRA- Weatherford International	\$1,001 - \$15,000	None	NONE	
	IRA- Blackrock Funds II Strategic	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
	IRA- Eaton Vance Mutual Funds	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	IRA- Sector SPDR TR SBO	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	IRA- SPDR Series Trust S&P Dividend	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
JT	11110 Ballweg Lane	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	S(part)
	IRA- Lazard Emerging Markets	\$1,001 - \$15,000	None	NONE	
	IRA- Lazard Mid Cap Equity	\$1,001 - \$15,000	None	NONE	
	IRA- MCM Nasdaq 25	\$1,001 - \$15,000	None	NONE	
	IRA- PAM China- India	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

Page 9 of 14

	IRA- MCM JNL 5	\$1,001 - \$15,000	None	NONE	
	IRA- PPM America High Yield Bond	\$1,001 - \$15,000	None	NONE	
	IRA- T. Rowe Price S-T Bond	\$15,001 - \$50,000	None	NONE	
	IRA- MCM Small Cap Index	\$1,001 - \$15,000	None	NONE	
	IRA- Jackson Dividend Income	\$1,001 - \$15,000	None	NONE	
	IRA- Jackson S&P 4	\$1,001 - \$15,000	None	NONE	
	IRA- Blackrock Comm Securities	\$1,001 - \$15,000	None	NONE	
	IRA- Mellon Capital Management	\$1,001 - \$15,000	None	NONE	
	IRA- Red Rocks	\$1,001 - \$15,000	None	NONE	
	IRA- Lazard Emerging Markets	\$15,001 - \$50,000	None	NONE	
	IRA- Lazard Mid Cap Equity	\$1,001 - \$15,000	None	NONE	
	IRA- MCM Nasdaq 25	\$15,001 - \$50,000	None	NONE	
	IRA- PAM China- India	\$1,001 - \$15,000	None	NONE	
	IRA- MCM JNL 5	\$15,001 - \$50,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

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	IRA- PPM America High Yield Bond	\$15,001 - \$50,000	None	NONE	
	IRA- T. Rowe Price S-T Bond	\$15,001 - \$50,000	None	NONE	
	IRA- MCM Small Cap Index	\$1,001 - \$15,000	None	NONE	
	IRA- Jackson S&P Dividend Income	\$1,001 - \$15,000	None	NONE	
	IRA- Jackson S&P 4	\$1,001 - \$15,000	None	NONE	
	IRA- Blackrock Comm Securities	\$1,001 - \$15,000	None	NONE	
	IRA- Mellon Capital Management	\$1,001 - \$15,000	None	NONE	
	IRA- Red Rocks	\$1,001 - \$15,000	None	NONE	
SP	IRA- Lazard Emerging Markets	\$1,001 - \$15,000	None	NONE	
SP	IRA- JNL/Lazard Mid Cap Equity	\$1,001 - \$15,000	None	NONE	
SP	IRA- Mellon Capital Management	\$1,001 - \$15,000	None	NONE	
SP	IRA- JNL/PAM China-India	\$1,001 - \$15,000	None	NONE	
SP	IRA- JNL/MCM JNL 5	\$1,001 - \$15,000	None	NONE	
SP	IRA- JNL/PPM America High Yield Bond	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Louis J. Barletta

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SP	IRA- T. Rowe Price S-T Bond	\$15,001 - \$50,000	None	NONE	
SP	IRA- JNL/MCM Small Cap Index	\$1,001 - \$15,000	None	NONE	
SP	IRA- Jackson National Life	\$1,001 - \$15,000	None	NONE	
SP	IRA- JNL/S&P 4	\$1,001 - \$15,000	None	NONE	
SP	IRA- JNL/Blackrock Comm Securities	\$1,001 - \$15,000	None	NONE	
SP	IRA- Mellon Capital Management	\$1,001 - \$15,000	None	NONE	
SP	IRA- Red Rocks	\$1,001 - \$15,000	None	NONE	

SCHEDULE IV - TRANSACTIONS

Name Louis J. Barletta

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities, futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	11110 Ballweg Lane	S(part)	Yes	08-19-10	\$15,001 - \$50,000
JT	LPL Financial (See attached Schedule 1)	P	N/A	Various	\$500,001 - \$1,000,000
JT	LPL Financial (See attached Schedule 2)	S	Yes	Various	\$500,001 - \$1,000,000
	Jackson Annuity (See attached Schedule 3)	P	N/A	Various	\$100,001 - \$250,000
SP	Jackson Annuity (See attached Schedule 4)	P	N/A	Various	\$100,001 - \$250,000
	Jackson Annuity (See attached Schedule 3)	S	Yes	Various	\$50,001 - \$100,000
SP	Jackson Annuity (See attached Schedule 4)	S	Yes	Various	\$15,001 - \$50,000

SCHEDULE V - LIABILITIES

Name Louis J. Barletta

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	Wachovia Bank, N.A.- Statesville, NC	December 2003	Mortgage on 322 Rocky Road, Hazleton, PA	\$100,001 - \$250,000
JT	First National Bank- Harrisburg, PA	December 2003	Line of credit, secured by 322 Rocky Road, Hazleton, PA	\$100,001 - \$250,000

SCHEDULE VIII - POSITIONS

Name Louis J. Barletta

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member	Luzerne County Community College- Advisory Board
Member	Pennsylvania League of Cities and Municipalities- Northeast District
Member	Federation for American Immigration Reform- National Board of Advisors
Member	National Republican Committee- Advisory Committee on Catholic Outreach
Member	Pennsylvania League of Cities and Municipalities- legislative Committee

Jackson Annuity 1006998522

Fund Name	Purchase Date March 11, 2010	Total Purchases	Transactions December 28, 2010	Value December 3, 2010	Gain/Loss
JNL/PIMCO Total Return Bond	34400.00	34400.00	(34872.66)	0.00	472.66
JNL/Mellon Cap. Managmt Small Cap Index	8600.00	8600.00		9796.48	1196.48
JNL/PPM American High Yield Bond	13760.00	13760.00	1743.62	16847.27	1343.65
JNL/Mellon Cap. Managmt NASDAQ 25	17200.00	17200.00		18964.36	1764.36
JNL/Lizard Mid Cap Equity	8600.00	8600.00		9725.10	1125.10
JNL/PAM China-India	8600.00	8600.00		9746.91	1146.91
JNL/S&P 4	8600.00	8600.00		9196.37	596.37
JNL/Red Rocks Listed Private Equity	8600.00	8600.00		9990.76	1390.76
JNL/BlackRock Commodity Securities	8600.00	8600.00		10082.42	1482.42
JNL/T Rowe Price Short-Term Bond	20640.00	20640.00	26154.50	46779.19	(15.31)
JNL/Lazard Emerging Markets	17200.00	17200.00		20125.04	2925.04
JNL/Mellon Capital Management JNL 5	17200.00	17200.00		19319.18	2119.18
JNL/S&P Dividend Income & Growth			3487.27	3486.81	(0.46)
JNL/Mellon Cap. Managmt Oil & Gas Sector			3487.27	3518.37	31.10
Totals	172000.00	172000.00		187578.26	15578.26

Schedule 4
Jackson Annuity - Spouse

Fund Name	Purchase Date March 11, 2010	Total Purchases	Transactions December 28, 2010	Value December 3, 2010	Gain/Loss
JNL/PIMCO Total Return Bond	15700.00	15700.00	(15951.08)	0.00	251.08
JNL/Mellon Cap. Managmt Small Cap Index	3925.00	3925.00		4480.99	555.99
JNL/PPM American High Yield Bond	6280.00	6280.00	797.55	7706.11	628.56
JNL/Mellon Cap. Managmt NASDAQ 25	7850.00	7850.00		8674.47	824.47
JNL/Lizard Mid Cap Equity	3925.00	3925.00		4448.36	523.36
JNL/PAM China-India	3925.00	3925.00		4458.33	533.33
JNL/S&P 4	3925.00	3925.00		4206.51	281.51
JNL/Red Rocks Listed Private Equity	3925.00	3925.00		4569.87	644.87
JNL/BlackRock Commodity Securities	3925.00	3925.00		4611.78	686.78
JNL/T. Rowe Price Short-Term Bond	9420.00	9420.00	11963.31	21397.23	13.92
JNL/Lazard Emerging Markets	7850.00	7850.00		9205.37	1355.37
JNL/Mellon Capital Management JNL 5	7850.00	7850.00		8836.78	986.78
JNL/S&P Dividend Income & Growth			1595.11	1594.90	(0.21)
JNL/Mellon Cap. Managmt Financial Sector			1595.11	1590.48	(4.63)
Totals	78500.00	78500.00		85781.18	7281.18

Jackson Annuity - Schedule 3

Fund Name	Purchase Date March 30,2010	Purchase Date April 8,2010	Total Purchases	Transactions December 28, 2010	Value December 3, 2010	Gain/Loss
JNL/PIMCO Total Return Bond	18849.16	6130.41	24979.57	(25386.74)	0.00	407.17
JNL/Mellon Cap. Managmt Small Cap Index	4712.29	1532.60	6244.89		7024.37	779.48
JNL/PPM American High Yield Bond	7539.66	2452.16	9991.82	507.73	11355.39	855.84
JNL/Mellon Cap. Managmt NASDAQ 25	9424.58	3065.20	12489.78		13439.73	949.95
JNL/Lizard Mid Cap Equity	4712.29	1532.60	6244.89		6961.58	716.69
JNL/PAM China-India	4712.29	1532.60	6244.89		6906.52	661.63
JNL/S&P 4	4712.29	1532.60	6244.89		6526.89	282.00
JNL/Red Rocks Listed Private Equity	4712.29	1532.60	6244.89		7079.39	834.50
JNL/BlackRock Commodity Securities	4712.29	1532.60	6244.89		7245.11	1000.22
JNL/T Rowe Price Short-Term Bond	11309.50	3678.24	14987.74	19040.06	34032.49	4.69
JNL/Lazard Emerging Markets	9424.58	3065.22	12489.80		14112.49	1622.69
JNL/Mellon Capital Management JNL 5	9424.58	3065.20	12489.78		13757.04	1267.26
JNL/S&P Dividend Income & Growth				2030.94	2026.19	(4.75)
JNL/Mellon Cap. Managmt Oil & Gas Sector				3808.01	3833.48	25.47
Totals	94245.80	30652.03	124897.83		134300.67	9402.84



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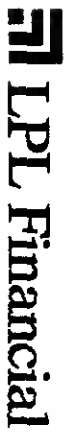
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negligence penalty or other sanction may be imposed on you if
this income is taxable and the IRS determines that it has not
been reported.

MARY GRACE BARILETTA AND
LOUIS J. BARILETTA

Schedule 1
Transactions- Purchases
12/31/10

DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT (IF APPLICABLE)	CAF ¹ NER BOX
SPDR S&P MTLSEMINING ETF CUSIP: 78464A755	02/05/10	PURCHASE	100.00	\$4,756.61-	11
SECTR SPDR SBI ENER ETF CUSIP: 81369Y508	02/05/10	PURCHASE	100.00	\$5,503.67-	11



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DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT	CASE ¹ REF. BOX
SPDR S&P MTL&MINING ETF CUSIP: 78464A755	02/05/10	PURCHASE	100.00	\$4,769.80-	11
SECTR SPDR SBI ENER ETF CUSIP: 81369Y506	02/05/10	PURCHASE	100.00	\$5,508.67-	11



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 been reported.

DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT	SAF ¹ MER. BOX
SPDR S&P MTL&MINING ETF	02/05/10	PURCHASE	50.00	\$2,393.14-	11
CUSIP: 78464A755					
SECTR SPDR SBI ENER ETF	02/05/10	PURCHASE	50.00	\$2,769.33-	11
CUSIP: 81389Y506					

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DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT (IF APPLICABLE)	CAT ¹ NER BOX
DEERE & COMPANY CUSIP: 244199105	12/07/10	PURCHASE	100.00	\$8,045.00-	11
EATON TAX MANAGED DIV I CUSIP: 277923686	10/08/10	PURCHASE	2,617.80	\$25,000.00-	11
HESS CORP CUSIP: 42809H107	12/03/10	PURCHASE	100.00	\$7,450.90-	11
ISHRS MSCI CDA INDEX ETF CUSIP: 464286509	03/22/10	PURCHASE	200.00	\$5,528.92-	11
ISHRS MSCI CDA INDEX ETF CUSIP: 464286509	05/25/10	PURCHASE	100.00	\$2,481.98-	11
SUBTOTAL				\$8,011.88-	
PROSH ULTST 500 CUSIP: 74347R883	05/20/10	PURCHASE	250.00	\$8,637.50-	11
PRUDENTIAL CORP BOND Z CUSIP: 74441R508	03/12/10	PURCHASE	8,896.85	\$100,000.00-	11
SPDR S&P INTL DIVINO ETF CUSIP: 78463X772	11/08/10	PURCHASE	150.00	\$8,568.60-	11
SPDR LEH HI YLD BOND ETF CUSIP: 78464A417	03/11/10	PURCHASE	625.00	\$24,643.75-	11
SPDR S&P DIVIOEND CUSIP: 78464A763	04/01/10	PURCHASE	200.00	\$9,894.00-	11
SPDR S&P DIVIOEND CUSIP: 78464A763	05/25/10	PURCHASE	100.00	\$4,552.98-	11
SUBTOTAL				\$14,446.96-	
SECTR SPDR SBI TECH ETF CUSIP: 81369Y803	03/22/10	PURCHASE	300.00	\$6,914.88-	11
SECTR SPDR SBI TECH ETF CUSIP: 81369Y803	06/10/10	PURCHASE	125.00	\$2,678.20-	11
SUBTOTAL				\$9,591.08-	
VANGUARD DIV APPREC ETF CUSIP: 921908844	03/11/10	PURCHASE	250.00	\$12,039.90-	11

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CONTINUED FROM PREVIOUS PAGE

DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT (IF APPLICABLE)	CASE ¹ SER. NO.
VGRD SMALL CAP GRNTH ETF CUSIP: 922906595	03/11/10	PURCHASE	100.00	\$6,509.80-	11
VGRD SMALL CAP GRNTH ETF CUSIP: 922906595	04/01/10	PURCHASE	100.00	\$6,569.96-	11
SUBTOTAL				\$13,079.76-	
VANGUARD SML CAP VAL ETF CUSIP: 922908611	03/11/10	PURCHASE	100.00	\$5,926.60-	11
VANGUARD SML CAP VAL ETF CUSIP: 922908611	04/01/10	PURCHASE	100.00	\$6,030.00-	11
SUBTOTAL				\$11,956.60-	
WSDMTRE INT MID DIV ETF CUSIP: 97717W776	04/27/10	PURCHASE	100.00	\$4,680.00-	11
WSDMTRE INT LGCP DIV ETF CUSIP: 97717W794	04/01/10	PURCHASE	125.00	\$5,757.50-	11



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LOUIS J. BARLETTA AND
MARY GRACE BARLETTA

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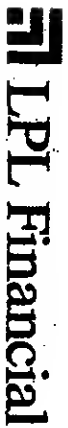
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DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT (IF APPLICABLE)	S&P ¹ MER BOX
ALLERGAN INC CUSIP: 018490102	08/05/10	PURCHASE	100.00	\$8,371.85-	11
ALTRIA GROUP INC CUSIP: 02209S103	08/31/10	PURCHASE	100.00	\$2,240.78-	11
ALTRIA GROUP INC CUSIP: 02209S103	11/23/10	PURCHASE	300.00	\$7,295.28-	11
SUBTOTAL				\$9,536.04-	
BRCLY S&P 500 VIX ST ETN CUSIP: 06740C527	08/11/10	PURCHASE	300.00	\$6,839.97-	11
BLCKRCK STRT INC OP INSL CUSIP: 09256H286	10/08/10	PURCHASE	2,448.18	\$25,000.00-	11
CARBO CERAMICS INC CUSIP: 140781105	07/13/10	PURCHASE	50.00	\$4,030.50-	11
CARBO CERAMICS INC CUSIP: 140781105	07/15/10	PURCHASE	50.00	\$3,950.00-	11
CARBO CERAMICS INC CUSIP: 140781105	08/06/10	PURCHASE	50.00	\$3,793.00-	11
SUBTOTAL				\$11,773.50-	

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LOUIS J. BARLETTA AND
MARY GRACE BARLETTA

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CONTINUED FROM PREVIOUS PAGE					
DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT	CALC' NBR BOX (IF APPLICABLE)
CLEAN ENERGY FUELS CORP CUSIP: 184489101	03/08/10	PURCHASE	200.00	\$3,989.84-	11
CONOCOPHILLIPS CUSIP: 2082SC104	05/17/10	PURCHASE	100.00	\$5,519.00-	11
CONOCOPHILLIPS CUSIP: 2082SC104	05/25/10	PURCHASE	50.00	\$2,438.50-	11
SUBTOTAL				\$7,956.50-	
DWS STRAT HIGH YLD TAX S CUSIP: 23337W501	03/08/10	PURCHASE	8,187.76	\$75,000.00-	11
DWS MUNICIPAL INCOME TR CUSIP: 23338M108	03/08/10	PURCHASE	2,200.00	\$25,937.78-	11
DWS MUNICIPAL INCOME TR CUSIP: 23338M108	03/08/10	PURCHASE	800.00	\$9,424.00-	11
SUBTOTAL				\$35,361.78-	
EMC CORP MASS CUSIP: 268648102	04/14/10	PURCHASE	300.00	\$5,788.00-	11
EATON EMG MKT LOC INCM I CUSIP: 277923447	10/08/10	PURCHASE	4,537.20	\$50,000.00-	11
INSTANIA SYSTEMS INC CUSIP: 45785V105	11/12/10	PURCHASE	500.00	\$3,386.40-	11
ISHRS 8RCLYS TIPS BD ETF CUSIP: 464287178	03/12/10	PURCHASE	300.00	\$31,288.15-	11
ISHRS SAP 500 GRWTH ETF CUSIP: 464287309	03/08/10	PURCHASE	200.00	\$11,750.00-	11
ISHRS SAP MIDCP400 ETF CUSIP: 464287606	03/10/10	PURCHASE	100.00	\$8,336.84-	11
ISHRS SAP MIDCP400 ETF CUSIP: 464287606	03/22/10	PURCHASE	50.00	\$4,259.50-	11
SUBTOTAL				\$12,598.34-	
ISHRS SAP MIDCP400 ETF CUSIP: 464287705	03/10/10	PURCHASE	100.00	\$7,034.88-	11

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LOUIS J. BARLETTA AMO
MARY GRACE BARLETTA

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CONTINUED FROM PREVIOUS PAGE					
DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT	CAE ¹ NER BOX
(If Applicable)					
ISHRS S&P MIDCP400	03/22/10	PURCHASE	50.00	\$3,698.97-	11
CUSIP: 484287706					
SUBTOTAL				\$10,631.85-	
ISHRS S&P US PFD	03/08/10	PURCHASE	239.00	\$9,237.35-	11
CUSIP: 464299697					
ISHRS S&P US PFD	03/12/10	PURCHASE	405.00	\$15,799.70-	11
CUSIP: 464288697					
SUBTOTAL				\$25,024.05-	
ISHRS SILVER TR	03/08/10	PURCHASE	200.00	\$3,390.00-	11
CUSIP: 464280109					
NOVAGOLD RES INC NEW	11/09/10	PURCHASE	500.00	\$7,135.00-	11
CUSIP: 66987E208					
NOVAGOLD RES INC NEW	11/10/10	PURCHASE	250.00	\$3,492.30-	11
CUSIP: 96987E208					
SUBTOTAL				\$10,617.30-	
NUCOR CORP	04/05/10	PURCHASE	200.00	\$9,499.98-	11
CUSIP: 670346105					
NUCOR CORP	10/08/10	PURCHASE	100.00	\$3,994.99-	11
CUSIP: 670346105					
SUBTOTAL				\$13,464.97-	
PMRSH FIN PFD PORT	03/12/10	PURCHASE	993.00	\$17,279.20-	11
CUSIP: 73935X229					
PMRSH \$ INDX BULL	03/24/10	PURCHASE	200.00	\$4,901.98-	11
CUSIP: 73936D107					
PROSH ULTST 500	05/20/10	PURCHASE	500.00	\$17,350.00-	11
CUSIP: 74347R883					
SPDR LEH HI YLD 90ND ETF	03/08/10	PURCHASE	1,000.00	\$39,300.00-	11
CUSIP: 79464A417					
SPDR LEH HI YLD 90ND ETF	03/12/10	PURCHASE	200.00	\$7,899.90-	11
CUSIP: 79464A417					
SPDR LEH HI YLD 90ND ETF	03/12/10	PURCHASE	200.00	\$7,900.00-	11
CUSIP: 78484A417					
SUBTOTAL				\$65,099.90-	

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IPL Financial

Member FINRA / SIPC
9785 Towne Centre Drive
San Diego, CA 92121-1968
Federal ID No: 95-2834236

TAX INFORMATION STATEMENT Tax Year 2010 Copy B For Recipient

Department of the Treasury - Internal Revenue Service
(keep for your records)

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, this income is taxable and the IRS determines that it has been reported.

LOUIS J. BARLETTA AND
MARY GRACE BARLETTA

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DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT (IF APPLICABLE)	CAC ¹ MER. MOX
SPDR S&P DIVIDEND ETF CUSIP: 78484A763	03/24/10	PURCHASE	300.00	\$14,726.87-	11
SANDRIDGE ENERGY INC CUSIP: 80007P307	10/08/10	PURCHASE	1,000.00	\$5,770.00-	11
VGRD SMALL CAP GRWTH ETF CUSIP: 922908695	03/08/10	PURCHASE	100.00	\$8,415.00-	11
VGRD SMALL CAP GRWTH ETF CUSIP: 922908595	03/22/10	PURCHASE	50.00	\$3,272.50-	11
SUBTOTAL				\$9,687.50-	
VANGUARD SML CAP VAL ETF CUSIP: 922908611	03/10/10	PURCHASE	100.00	\$5,893.16-	11
VANGUARD SML CAP VAL ETF CUSIP: 922908811	03/22/10	PURCHASE	50.00	\$3,005.97-	11
SUBTOTAL				\$8,899.13-	
VISA INC CLASS A CUSIP: 92828C838	04/29/10	PURCHASE	100.00	\$9,307.80-	11
WSDMTRF INT LGCP DIV ETF CUSIP: 97717M794	03/10/10	PURCHASE	200.00	\$9,078.00-	11



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9785 Towne Centre Drive
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MARY GRACE BARLETTA AND
LOUIS J. BARLETTA

TAX INFORMATION STATEMENT Tax Year 2010 Copy B For Recipient

Department of the Treasury - Internal Revenue Service
(Keep for your records)

This is important tax information and is being furnished
Internal Revenue Service. If you are required to file a return,
negligence penalty or other sanction may be imposed on you if
this income is taxable and the IRS determines that it has not
been reported.

DESCRIPTION	DATE	ACTIVITY	QUANTITY	AMOUNT (IF APPLICABLE)	CAE ¹ MER BOX
SPDR S&P MTLSEMINING ETF CUSIP: 78464A/55	02/05/10	PURCHASE	100.00	\$4,754.59	11
SECTR SPDR SBI ENER ETF CUSIP: 81369Y/506	02/05/10	PURCHASE	100.00	\$5,501.67	11

FEDERAL ID NO: 89-2834236

Transactions- Sales

12/31/10

MARY GRACE BARLETTA AND
LOUIS J. BARLETTA

2010 REALIZED GAINS AND LOSSES

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SHORT-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
DMS INTER TAX/AMT FREE C	8.891	03/27/08	03/04/10	101.62	96.91	0.00	4.71
DMS INTER TAX/AMT FREE C	9.991	03/27/09	03/04/10	101.62	96.91	0.00	4.71
DMS INTER TAX/AMT FREE C	9.891	03/27/09	03/04/10	101.62	96.91	0.00	4.71
DMS INTER TAX/AMT FREE C	8.830	03/27/09	03/04/10	100.82	96.25	0.00	4.57
DMS INTER TAX/AMT FREE C	9.333	04/28/09	03/04/10	106.67	103.69	0.00	2.98
DMS INTER TAX/AMT FREE C	9.273	04/28/09	03/04/10	105.99	103.02	0.00	2.97
DMS INTER TAX/AMT FREE C	9.333	04/28/09	03/04/10	106.67	103.69	0.00	2.98
DMS INTER TAX/AMT FREE C	9.333	04/28/09	03/04/10	106.67	103.69	0.00	2.98
DMS INTER TAX/AMT FREE C	9.164	05/27/09	03/04/10	93.31	91.60	0.00	1.71
DMS INTER TAX/AMT FREE C	8.109	05/27/09	03/04/10	93.31	91.60	0.00	1.71
DMS INTER TAX/AMT FREE C	8.194	05/27/09	03/04/10	93.31	91.60	0.00	1.71
DMS INTER TAX/AMT FREE C	8.164	05/27/09	03/04/10	93.31	91.60	0.00	1.71
DMS INTER TAX/AMT FREE C	8.879	06/26/09	03/04/10	102.61	98.87	0.00	3.94
DMS INTER TAX/AMT FREE C	8.879	06/26/09	03/04/10	102.61	98.87	0.00	3.94
DMS INTER TAX/AMT FREE C	8.979	06/26/09	03/04/10	102.61	98.87	0.00	3.94
DMS INTER TAX/AMT FREE C	9.920	06/28/09	03/04/10	101.95	98.03	0.00	3.92
DMS INTER TAX/AMT FREE C	9.854	07/29/09	03/04/10	110.34	107.45	0.00	2.89
DMS INTER TAX/AMT FREE C	9.654	07/29/09	03/04/10	110.34	107.45	0.00	2.89
DMS INTER TAX/AMT FREE C	9.654	07/29/09	03/04/10	110.34	107.45	0.00	2.89
DMS INTER TAX/AMT FREE C	9.590	07/29/09	03/04/10	109.61	106.74	0.00	2.87
DMS INTER TAX/AMT FREE C	9.150	08/27/09	03/04/10	83.15	81.36	0.00	1.79
DMS INTER TAX/AMT FREE C	9.150	08/27/09	03/04/10	83.15	81.36	0.00	1.79
DMS INTER TAX/AMT FREE C	9.150	08/27/09	03/04/10	83.15	81.36	0.00	1.79
DMS INTER TAX/AMT FREE C	8.099	09/27/09	03/04/10	92.56	90.79	0.00	1.78
DMS INTER TAX/AMT FREE C	9.493	09/29/08	03/04/10	97.07	97.75	0.00	(0.68)
DMS INTER TAX/AMT FREE C	9.437	09/29/09	03/04/10	96.43	97.11	0.00	(0.68)
DMS INTER TAX/AMT FREE C	9.493	09/29/09	03/04/10	97.07	97.75	0.00	(0.68)
DMS INTER TAX/AMT FREE C	8.493	09/29/09	03/04/10	97.07	97.75	0.00	(0.68)
DMS INTER TAX/AMT FREE C	9.526	10/29/09	03/04/10	97.45	98.26	0.00	1.19
DMS INTER TAX/AMT FREE C	9.469	10/28/09	03/04/10	96.90	95.61	0.00	1.19
DMS INTER TAX/AMT FREE C	9.526	10/28/09	03/04/10	97.45	98.26	0.00	1.19
DMS INTER TAX/AMT FREE C	7.458	10/28/09	03/04/10	85.24	84.20	0.00	1.04
DMS INTER TAX/AMT FREE C	7.938	11/25/09	03/04/10	87.27	86.59	0.00	0.68
DMS INTER TAX/AMT FREE C	7.636	11/25/09	03/04/10	87.27	86.59	0.00	0.68
DMS INTER TAX/AMT FREE C	4.919	11/25/09	03/04/10	55.06	54.94	0.00	0.42
DMS INTER TAX/AMT FREE C	7.586	11/25/09	03/04/10	86.70	85.03	0.00	0.67
DMS INTER TAX/AMT FREE C	1.700	12/07/09	03/04/10	19.43	19.36	0.00	0.07
DMS INTER TAX/AMT FREE C	1.975	12/07/09	03/04/10	21.44	21.37	0.00	0.07
DMS INTER TAX/AMT FREE C	1.989	12/07/09	03/04/10	21.57	21.51	0.00	0.06
DMS INTER TAX/AMT FREE C	1.700	12/07/09	03/04/10	19.43	19.36	0.00	0.07
DMS INTER TAX/AMT FREE C	1.988	12/07/09	03/04/10	21.57	21.51	0.00	0.06
DMS INTER TAX/AMT FREE C	1.072	12/07/09	03/04/10	12.25	12.21	0.00	0.04
DMS INTER TAX/AMT FREE C	1.191	12/07/09	03/04/10	13.51	13.57	0.00	

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MARY GRACE BARILETTA AND
LOUIS J. BARILETTA

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2010 REALIZED GAINS AND LOSSES

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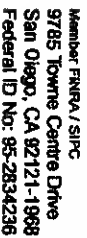
SHORT-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
DMS INTER TAX/AMT FREE C	8.962	12/28/08	03/04/10	102.43	101.54	0.00	0.88
DMS INTER TAX/AMT FREE C	8.962	12/28/08	03/04/10	102.43	101.54	0.00	0.89
DMS INTER TAX/AMT FREE C	5.561	12/28/09	03/04/10	63.56	83.01	0.00	0.55
DMS INTER TAX/AMT FREE C	8.801	12/28/09	03/04/10	101.73	100.85	0.00	0.88
DMS INTER TAX/AMT FREE C	8.633	01/27/10	08/04/10	74.87	74.15	0.00	0.52
DMS INTER TAX/AMT FREE C	6.533	01/27/10	03/04/10	74.67	74.15	0.00	0.52
DMS INTER TAX/AMT FREE C	3.783	01/27/10	03/04/10	43.23	42.84	0.00	0.29
DMS INTER TAX/AMT FREE C	8.484	01/27/10	03/04/10	74.11	73.59	0.00	0.52
DMS INTER TAX/AMT FREE C	6.880	02/24/10	03/04/10	78.75	78.41	0.00	0.34
DMS INTER TAX/AMT FREE C	8.890	02/24/10	03/04/10	78.75	78.41	0.00	0.34
DMS INTER TAX/AMT FREE C	3.951	02/24/10	03/04/10	45.15	44.95	0.00	0.18
DMS INTER TAX/AMT FREE C	8.637	02/24/10	03/04/10	78.60	77.87	0.00	0.78
FT ISE REVR NAT GAS ETF	200.000	12/14/08	09/20/10	3,188.94	3,506.78	0.00	(398.84)
FT ISE REVR NAT GAS ETF	200.000	12/14/08	08/20/10	3,188.94	3,510.83	0.00	(340.89)
FT ISE REVR NAT GAS ETF	200.000	12/14/09	08/20/10	3,189.95	3,510.83	0.00	(840.88)
FT ISE REVR NAT GAS ETF	200.000	12/14/09	08/20/10	8,170.02	9,512.84	0.00	(342.82)
ISHARES SILVER TRUST	200.000	06/02/09	04/01/10	3,488.96	3,243.11	0.00	256.85
ISHARES SILVER TRUST	200.000	08/02/08	04/01/10	3,489.96	3,243.11	0.00	256.85
PROSH ULTST 500	125.000	05/20/10	11/08/10	8,204.94	4,318.75	0.00	(1,113.81)
PROSH ULTST 500	50.000	08/01/09	03/11/10	1,613.11	2,263.08	0.00	(849.95)
PROSH ULTST 500	50.000	08/31/09	03/11/10	1,813.11	2,262.54	0.00	(848.43)
PROSH ULTST 500	50.000	08/31/08	03/11/10	1,813.11	2,260.00	0.00	(848.89)
PROSH ULTST 500	50.000	08/31/09	03/11/10	1,813.14	2,260.00	0.00	(846.86)
SPDR S&P MTLSEMINING ETF	125.000	05/20/10	09/03/10	4,001.18	4,318.76	0.00	(817.57)
SPDR S&P MTLSEMINING ETF	100.000	02/05/10	10/07/10	5,408.94	4,756.81	0.00	652.33
SPDR S&P MTLSEMINING ETF	60.000	02/05/10	10/07/10	2,704.48	2,377.30	0.00	327.18
SPDR S&P MTLSEMINING ETF	50.000	02/05/10	11/23/10	3,029.44	2,377.28	0.00	852.15
SPDR S&P MTLSEMINING ETF	50.000	02/05/10	11/23/10	3,029.45	2,398.14	0.00	636.31
WSDMTRE INT LGCP DIV ETF	125.000	04/01/10	12/03/10	5,585.31	5,757.50	0.00	(162.19)
SUBTOTAL SHORT-TERM CAPITAL GAINS AND LOSSES:				57,690.33	60,363.29	0.00	(2,662.96)

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
DMS INTER TAX/AMT FREE C	1,832.338	08/23/08	03/04/10	20,843.82	19,770.82	0.00	1,172.70
DMS INTER TAX/AMT FREE C	1,832.338	08/23/08	03/04/10	20,843.82	19,770.82	0.00	1,172.70
DMS INTER TAX/AMT FREE C	513.077	08/23/08	03/04/10	5,854.47	5,535.08	0.00	328.38
DMS INTER TAX/AMT FREE C	1,832.338	08/23/08	03/04/10	20,843.82	19,770.92	0.00	1,172.70
DMS INTER TAX/AMT FREE C	0.201	09/26/08	03/04/10	2.28	2.18	0.00	0.13
DMS INTER TAX/AMT FREE C	0.201	09/26/08	03/04/10	2.28	2.18	0.00	0.13
DMS INTER TAX/AMT FREE C	0.201	08/26/06	03/04/10	2.28	2.15	0.00	0.13
DMS INTER TAX/AMT FREE C	0.201	09/28/08	03/04/10	2.28	2.16	0.00	0.13
DMS INTER TAX/AMT FREE C	8.608	10/29/08	03/04/10	75.52	70.05	0.00	5.47

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LONG-TERM CAPITAL GAINS AND LOSSES:

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9785 Towne Centre Drive
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Federal ID No: 95-2834236

MARY GRACE BARLETTA AND
LOUIS J. BARLETTA

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2010 REALIZED GAINS AND LOSSES

CONTINUED FROM PREVIOUS PAGE

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
WSDMTR INT LGCP DIV ETF	11/11/09	12/03/10	6,714.37	7,262.56	0.00	(568.19)
WSDMTR INT LGCP DIV ETF	11/11/09	12/03/10	4,476.24	4,859.05	0.00	(382.81)
WSDMTR INT LGCP DIV ETF	11/11/09	12/03/10	3,357.18	3,648.67	0.00	(291.49)
SUBTOTAL LONG-TERM CAPITAL GAINS AND LOSSES			193,099.96	154,994.25	0.00	8,105.71
NE						
TOTAL GAINS/LOSSES			250,780.29	245,357.54	0.00	5,422.75

11/11/09 12/03/10 6,714.37 7,262.56 0.00 (568.19)



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MARY GRACE BARILETTA AND
LOUIS J. BARILETTA

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2010 REALIZED GAINS AND LOSSES

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

SHORT-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
SPDR S&P BIOTECH ETF	115.000	05/04/09	02/04/10	6,193.39	5,704.66	0.00	488.53
SUBTOTAL SHORT-TERM CAPITAL GAINS AND LOSSES				6,193.39	5,704.66	0.00	488.53

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
COLUMBIA MARSHCO 21ST C	153.194	07/15/05	02/04/10	1,586.93	1,647.29	0.00	(60.36)
COLUMBIA MARSHCO 21ST C	699.614	07/19/05	02/04/10	9,321.16	9,705.00	0.00	(383.84)
COLUMBIA MARSHCO 21ST C	14.567	06/21/06	02/04/10	150.89	173.06	0.00	(22.17)
COLUMBIA MARSHCO 21ST C	6.543	06/21/06	02/04/10	67.77	77.73	0.00	(9.96)
COLUMBIA MARSHCO 21ST C	3.004	12/15/06	02/04/10	31.11	40.76	0.00	(9.65)
COLUMBIA MARSHCO 21ST C	5.307	06/22/07	02/04/10	54.97	79.26	0.00	(24.31)
COLUMBIA MARSHCO 21ST C	9.306	06/22/07	02/04/10	96.42	139.06	0.00	(42.64)
COLUMBIA MARSHCO 21ST C	3.733	12/14/07	02/04/10	86.67	59.72	0.00	(21.05)
COLUMBIA MARSHCO 21ST C	17.657	12/14/07	02/04/10	184.68	265.71	0.00	(100.73)
COLUMBIA MARSHCO 21ST C	365.857	03/16/06	02/04/10	4,100.67	5,355.95	0.00	(1,255.28)
COLUMBIA MARSHCO 21ST C	307.458	07/16/06	02/04/10	3,164.99	4,005.00	0.00	(820.01)
ISHS CHW & STRS MURS IDX	45.000	07/16/06	02/04/10	2,157.48	3,490.64	0.00	(1,333.16)
SUBTOTAL LONG-TERM CAPITAL GAINS AND LOSSES				20,976.02	25,059.20	0.00	(4,083.18)

NET CAPITAL GAINS/LOSSES

27,169.41

30,784.06

0.00

(3,614.65)

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MARY GRACE BARLETTA AND
LOUIS J. BARLETTA

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2010 REALIZED GAINS AND LOSSES

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SHORT-TERM CAPITAL GAINING AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
SPDR S&P BIOTECH ETF	115.000	06/04/09	02/04/10	9,201.40	5,700.01	0.00	501.39
SUBTOTAL SHORT-TERM CAPITAL GAINS AND LOSSES				6,201.40	5,700.01	0.00	501.39

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
COLUMBIA MARSHCO 21ST C	153.184	07/15/05	02/04/10	1,508.86	1,847.29	0.00	(80.31)
COLUMBIA MARSHCO 21ST C	950.935	07/19/05	02/04/10	9,949.99	10,255.00	0.00	(405.01)
COLUMBIA MARSHCO 21ST C	5.689	06/21/09	02/04/10	69.39	79.57	0.00	(10.19)
COLUMBIA MARSHCO 21ST C	14.913	09/21/06	02/04/10	154.48	177.17	0.00	(22.69)
COLUMBIA MARSHCO 21ST C	3.075	12/15/06	02/04/10	31.95	41.73	0.00	(9.88)
COLUMBIA MARSHCO 21ST C	5.590	06/22/07	02/04/10	57.59	83.07	0.00	(25.48)
COLUMBIA MARSHCO 21ST C	9.754	09/22/07	02/04/10	101.04	145.72	0.00	(44.99)
COLUMBIA MARSHCO 21ST C	3.911	12/14/07	02/04/10	40.51	62.59	0.00	(22.07)
COLUMBIA MARSHCO 21ST C	19.712	12/14/07	02/04/10	193.84	289.39	0.00	(105.55)
COLUMBIA MARSHCO 21ST C	395.957	03/19/09	02/04/10	4,100.90	5,365.95	0.00	(1,265.15)
COLUMBIA MARSHCO 21ST C	307.455	07/19/09	02/04/10	3,195.08	4,005.00	0.00	(919.92)
ISHS CHN & STRS MURS IDX	45.000	07/19/08	02/04/10	2,158.79	3,484.26	0.00	(1,325.48)
SUBTOTAL LONG-TERM CAPITAL GAINING AND LOSSES				21,530.32	25,636.73	0.00	(4,106.41)

NET CAPITAL GAINS/LOSSES

27,731.72 31,336.74 0.00 (3,605.02)

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Member FINRA / SIPC
9785 Towne Centre Drive
San Diego, CA 92121-1988
Federal ID No. 95-2834236

MARY GRACE BARLETTA AND
LOUIS J. BARLETTA

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2010 REALIZED GAINS AND LOSSES

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
COLUMBIA MARSICO 21ST C	208.875	07/19/05	02/04/10	2,182.79	2,253.79	0.00	(91.00)
COLUMBIA MARSICO 21ST C	5.854	06/21/05	02/04/10	70.93	81.42	0.00	(10.49)
COLUMBIA MARSICO 21ST C	15.268	06/21/05	02/04/10	157.92	181.28	0.00	(23.38)
COLUMBIA MARSICO 21ST C	3.147	12/15/06	02/04/10	32.58	42.70	0.00	(10.14)
COLUMBIA MARSICO 21ST C	10.199	06/22/07	02/04/10	105.56	152.38	0.00	(46.83)
COLUMBIA MARSICO 21ST C	5.816	06/22/07	02/04/10	60.18	88.87	0.00	(28.69)
COLUMBIA MARSICO 21ST C	19.588	12/14/07	02/04/10	202.51	313.08	0.00	(110.57)
COLUMBIA MARSICO 21ST C	4.090	12/14/07	02/04/10	42.32	85.44	0.00	(23.12)
COLUMBIA MARSICO 21ST C	395.857	03/18/08	02/04/10	4,098.93	5,355.95	0.00	(1,259.02)
COLUMBIA MARSICO 21ST C	307.456	07/18/08	02/04/10	3,182.08	4,005.00	0.00	(822.92)
ISHS CHN & STRS MARS IDX	45.000	07/18/08	02/04/10	2,155.68	3,485.17	0.00	(1,329.49)
SENECA VLY PA 5.0 010120	50,000.000	11/02/05	03/11/10	51,080.07	51,441.01	50,870.78	(208.21)
SENECA VLY PA 5.0 010120	50,000.000	11/02/05	09/20/10	53,408.00	51,441.01	50,783.70	2,614.30
SUBTOTAL LONG-TERM CAPITAL GAINS AND LOSSES				116,757.45	118,905.10	101,664.49	(930.12)
NET CAPITAL GAINS/LOSSES				118,757.45	118,905.10	101,664.49	(930.12)

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Member FINRA/SIPC
9785 Towne Centre Drive
San Diego, CA 92121-1988
Federal ID No: 95-2834236

MARY GRACE BARLETTA AND
LOUIS J. BARLETTA

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2010 REALIZED GAINS AND LOSSES

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

SHORT-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
SPDR S&P 500 TECH ETF	115.000	08/04/09	02/04/10	5,201.41	5,704.72	0.00	496.88
SUBTOTAL SHORT-TERM CAPITAL GAINS AND LOSSES				5,201.41	5,704.72	0.00	496.69

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
COLUMBIA MARSICO 21ST C	153.194	07/15/05	02/04/10	1,588.89	1,847.28	0.00	(80.40)
COLUMBIA MARSICO 21ST C	862.708	07/18/05	02/04/10	8,838.58	8,905.00	0.00	(366.42)
COLUMBIA MARSICO 21ST C	14.318	08/21/08	02/04/10	146.28	170.07	0.00	(21.78)
COLUMBIA MARSICO 21ST C	6.428	06/21/05	02/04/10	66.58	76.36	0.00	(9.79)
COLUMBIA MARSICO 21ST C	2.952	12/15/06	02/04/10	30.57	40.08	0.00	(9.49)
COLUMBIA MARSICO 21ST C	5.121	08/22/07	02/04/10	53.04	76.51	0.00	(23.47)
COLUMBIA MARSICO 21ST C	8.883	06/22/07	02/04/10	83.05	134.21	0.00	(41.16)
COLUMBIA MARSICO 21ST C	3.803	12/14/07	02/04/10	37.32	57.64	0.00	(20.32)
COLUMBIA MARSICO 21ST C	17.234	12/14/07	02/04/10	178.52	276.75	0.00	(97.23)
COLUMBIA MARSICO 21ST C	386.857	03/18/08	02/04/10	4,100.56	5,355.95	0.00	(1,255.37)
COLUMBIA MARSICO 21ST C	307.456	07/18/08	02/04/10	3,184.92	4,005.09	0.00	(820.08)
ISHS CHN & STRS MJRS IDX	45.000	07/18/08	02/04/10	2,157.01	3,494.75	0.00	(1,337.74)
SUBTOTAL LONG-TERM CAPITAL GAINS AND LOSSES				20,573.36	24,638.61	0.00	(4,065.25)

NET CAPITAL GAINS/LOSSES

28,774.77 30,343.33 0.00 (3,568.56)

CONTINUED ON THE NEXT PAGE

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9785 Towne Centre Drive
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Federal ID No: 95-2834236

LOUIS J. BARLETTA AND
MARY GRACE BARLETTA

2010 REALIZED GAINS AND LOSSES

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THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

SHORT-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
ALTRIA GROUP INC	314.000	04/01/08	03/08/10	8,506.74	5,197.04	0.00	1,369.70
APPLE INC	22.000	04/01/08	03/08/10	4,820.14	2,383.00	0.00	2,437.14
AT&T INC	225.000	04/01/08	03/08/10	5,694.69	5,847.30	0.00	(152.61)
BP PLC SPONS ADRT	132.000	11/03/09	03/08/10	7,412.03	7,582.38	0.00	(180.35)
BRCLY SAP 500 VIX ST ETN	150.000	08/11/10	08/03/10	2,924.95	3,419.88	0.00	(495.04)
BRCLY SAP 500 VIX ST ETN	150.000	08/11/10	09/20/10	2,509.80	3,419.88	0.00	(810.08)
CERAMICS INC	50.000	07/13/10	10/28/10	4,203.75	4,030.50	0.00	173.25
CERAMICS INC	50.000	07/15/10	10/28/10	4,203.77	3,950.00	0.00	253.77
CERAMICS INC	50.000	08/08/10	10/28/10	4,203.77	3,793.00	0.00	410.77
CLEAN ENERGY FUELS CORP	200.000	03/08/10	12/28/10	2,824.11	3,968.84	0.00	(1,145.73)
COCA COLA COMPANY	44.000	04/01/09	03/08/10	2,392.24	1,978.98	0.00	413.25
COLGATEPALMOLIVE COMPANY	73.000	11/03/09	03/08/10	8,124.66	5,882.87	0.00	2,241.79
CONOCOPHILLIPS	50.000	05/25/10	06/15/10	2,881.95	2,436.50	0.00	445.45
DISNEY WALT COMPANY	108.000	04/01/09	03/08/10	8,574.91	2,028.08	0.00	1,548.82
DOW CHEMICAL COMPANY	141.000	04/01/09	03/08/10	4,186.44	1,252.04	0.00	2,934.40
DOW MUNICIPAL INCOME TR	2,200.000	03/08/10	12/30/10	24,049.25	25,937.78	0.00	(1,888.53)
DWS MUNICIPAL INCOME TR	800.000	03/08/10	12/30/10	8,745.18	9,424.00	0.00	(678.81)
DWS STRAT HIGH YLD TAX S	8,187.763	03/26/10	10/08/10	77,097.03	75,000.00	0.00	2,097.03
DWS STRAT HIGH YLD TAX S	14.567	03/26/10	10/08/10	181.86	178.72	0.00	3.14
DWS STRAT HIGH YLD TAX S	28.418	04/27/10	10/08/10	355.22	348.12	0.00	7.10
DWS STRAT HIGH YLD TAX S	24.126	05/25/10	10/08/10	301.57	296.30	0.00	5.27
DWS STRAT HIGH YLD TAX S	28.239	08/25/10	10/08/10	352.98	342.54	0.00	10.45
DWS STRAT HIGH YLD TAX S	27.183	07/27/10	10/08/10	339.79	332.45	0.00	7.34
DWS STRAT HIGH YLD TAX S	24.872	08/25/10	10/08/10	310.90	311.15	0.00	(0.25)
DWS STRAT HIGH YLD TAX S	28.038	09/27/10	10/08/10	350.48	351.03	0.00	(0.54)
EATON EMG MKT LOC INCOM I	4,537.205	10/08/10	12/28/10	47,050.81	50,000.00	49,984.85	(2,934.04)
EATON EMG MKT LOC INCOM I	15.888	11/01/10	12/28/10	182.86	170.51	0.00	11.35
EATON EMG MKT LOC INCOM I	29.240	12/01/10	12/28/10	308.23	302.09	0.00	6.14
EATON EMG MKT LOC INCOM I	50.000	04/01/09	03/08/10	3,978.44	3,433.38	0.00	545.06
ENTERGY CORP NEW	108.000	04/01/09	03/08/10	7,039.37	7,338.06	0.00	(298.69)
EXXON MOBIL CORP	2,950.231	11/03/09	03/08/10	15,459.21	17,111.34	0.00	(1,652.13)
FEDERATED EQ PRUD BEAR A	42.000	04/01/09	03/08/10	2,166.75	1,385.93	0.00	780.82
HEWLETT-PACKARD COMPANY	144.000	04/01/09	03/08/10	15,035.65	14,551.17	0.00	484.48
ISHARES BARCLAY AGRT BD	116.000	11/03/09	03/08/10	12,112.05	12,089.23	0.00	22.83
ISHARES BARCLAY AGRT BO	103.000	11/03/09	03/08/10	10,882.39	10,753.20	0.00	129.19
ISHARES INVESTMT 80 FD	100.000	03/08/10	10/07/10	2,213.95	1,695.00	0.00	518.95
ISHRS SILVER TR	100.000	03/08/10	10/07/10	2,213.95	1,695.00	0.00	518.95
ISHRS SILVER TR	200.000	03/08/10	08/11/10	1,252.92	1,750.00	0.00	(497.08)
ISHRS SILVER TR	35.000	04/01/09	03/08/10	1,494.48	967.39	0.00	527.09
JPORGAN 500 GRNTH FD	97.000	04/01/09	03/08/10	8,335.95	5,337.70	0.00	2,998.25
JPORGAN 500 GRNTH FD	158.000	04/01/09	03/08/10	7,109.90	4,683.12	0.00	2,426.78
MC DONALDUS CORP	202.000	04/01/09	03/08/10	5,803.97	3,898.24	0.00	1,905.73
MC DONALDUS CORP	2,001.970	06/25/09	03/08/10	20,900.57	19,999.58	0.00	900.99
MC DONALDUS CORP	538.000	11/03/09	03/08/10	8,441.33	5,714.51	0.00	2,726.82

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Member FINRA / SIPC
9785 Towne Centre Drive
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Federal ID No: 95-2834236

LOUIS J. BARLETTA AND
MARY GRACE BARLETTA

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2010 REALIZED GAINS AND LOSSES

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THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

SHORT-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
NOVARTIS AG SPONS ADR	110.000	04/01/09	03/08/10	5,974.30	4,199.68	0.00	1,774.64
POWERSH \$ INDX TR BULLSH	200.000	03/24/10	05/20/10	5,008.51	4,801.88	0.00	206.53
PROSH ULTST 500	100.000	05/20/10	09/20/10	2,986.22	3,470.00	0.00	(483.78)
PRSH ULTST 500	200.000	05/20/10	08/06/10	8,258.45	8,940.00	0.00	(681.55)
PRSH ULTST 500	100.000	05/20/10	08/06/10	3,141.22	3,470.00	0.00	(328.78)
PRSH ULTST 500	100.000	05/20/10	08/03/10	3,200.94	3,470.00	0.00	(269.06)
GOLD TRUST GOLD ETF	66.000	04/01/08	03/08/10	7,161.85	5,920.06	0.00	1,241.79
SOLD TRUST GOLD ETF	28.000	11/03/09	03/08/10	3,080.81	2,873.04	0.00	107.77
SUNOVOR ENERGY INC NEW	174.000	04/01/09	03/08/10	5,413.14	3,942.78	0.00	1,470.36
TEVA PHARMACEUTICAL ADR	115.000	04/01/09	03/08/10	8,884.03	5,248.54	0.00	1,734.49
UNION PACIFIC CORP	103.000	04/01/09	03/08/10	7,116.22	4,318.77	0.00	2,796.45
VISA INC CLASS A	100.000	04/29/10	07/13/10	7,584.77	8,307.80	0.00	(1,723.03)
VODAFONE GRP PLC NEW ADR	268.000	04/01/08	03/08/10	5,784.31	4,828.40	0.00	954.81
SUBTOTAL SHORT-TERM CAPITAL GAINS AND LOSSES				425,986.87	405,210.15	54,786.83	20,791.87

DO NOT PRINT OR COPY FROM THIS PAGE

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
3M COMPANY	8.000	08/13/05	03/08/10	852.38	593.12	0.00	59.27
ABBOTT LABORATORIES	74.000	08/04/08	03/08/10	8,034.82	5,893.56	0.00	341.06
APPLE INC	114.000	04/01/09	04/21/10	5,938.18	5,314.08	0.00	824.10
CISCO SYSTEMS INC	25.000	04/01/08	05/07/10	5,844.41	2,707.94	0.00	3,236.47
CISCO SYSTEMS INC	200.000	03/08/02	03/08/10	5,148.42	3,280.00	0.00	1,868.42
CISCO SYSTEMS INC	53.000	03/08/02	03/08/10	1,363.81	887.60	0.00	496.21
CISCO SYSTEMS INC	200.000	03/08/02	10/29/10	4,591.82	3,273.98	0.00	1,317.96
DIAMOND HILL LONG SHRT A	817.778	07/11/08	03/08/10	14,896.53	18,024.40	0.00	(1,128.87)
DIAMOND HILL LONG SHRT A	11.833	12/17/08	03/08/10	193.87	189.89	0.00	23.98
DIAMOND HILL LONG SHRT A	29.416	12/31/08	03/08/10	477.43	402.71	0.00	74.72
DISNEY WALT COMPANY	100.000	04/01/09	05/20/10	3,258.94	1,877.88	0.00	1,381.08
DOWN CHEMICAL COMPANY	100.000	04/01/09	05/20/10	2,558.95	887.96	0.00	1,668.99
FREEPORT MCMRN COP & GLD	75.000	03/05/08	03/08/10	6,056.97	2,342.81	0.00	3,714.06
GOOGLE INC CL A	13.000	04/01/09	11/15/10	7,768.41	4,607.59	0.00	3,160.82
HEWLETT-PACKARD COMPANY	100.000	04/01/09	04/20/10	5,341.95	3,298.81	0.00	2,042.14
ISHARES INVESTMT BO FD	156.000	12/04/08	03/08/10	18,482.06	14,440.92	0.00	2,041.14
JOHNSON & JOHNSON	4.000	10/17/08	09/28/10	248.51	253.24	0.00	(3.73)
JPMORGAN CHASE & COMPANY	93.000	12/04/08	08/28/10	5,801.30	5,296.92	0.00	504.38
JPMORGAN HIGHERIDGE STAT A	100.000	04/01/08	05/20/10	3,851.30	2,783.94	0.00	1,067.99
JPMORGAN HIGHERIDGE STAT A	724.828	07/11/08	03/08/10	11,448.12	11,753.47	0.00	(304.35)
MICROSOFT CORP	3.799	12/23/08	03/08/10	60.03	62.27	0.00	(2.24)
	10.000	12/11/08	03/08/10	287.32	200.13	0.00	87.18

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Member FINRA / SIPC
9785 Towne Centre Drive
San Diego, CA 92121-1868
Federal ID No: 95-2834236

LOUIS J. BARLETTA AND
MARY GRACE BARLETTA

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2010 REALIZED GAINS AND LOSSES

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THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

LONG-TERM CAPITAL GAINS AND LOSSES:

DESCRIPTION	QUANTITY	DATE ACQUIRED	DATE SOLD	GROSS PROCEEDS	ORIGINAL COST BASIS	ADJUSTED COST BASIS	GAIN OR LOSS
NORFOLK SOUTHERN CORP	25,000	04/01/09	05/07/10	1,384.97	870.40	0.00	524.57
PROCTER & GAMBLE COMPANY	131,000	08/22/08	03/09/10	8,302.89	7,984.45	0.00	318.23
SUBTOTAL LONG-TERM CAPITAL GAINS AND LOSSES				118,100.50	94,968.91	0.00	23,131.59

NET CAPITAL GAINS/LOSSES

544,087.37	500,179.06	54,786.83	43,923.48
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UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 6
For use by Members, officers, and employees

MARK S CRITZ
(Full Name)

814-242-0866
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2011 MAY 16 PM 12:39
(Office Use Only) 9 2011 MC

Filer Status

☒ Member of the U.S. House of Representatives
State: PA
District: 12

☐ Officer Or Employee

Employing Office:

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts--</p>	<p>Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions--</p>	<p>Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

SCHEDULE I - EARNED INCOME

Name MARK S CRITZ

Page 2 of 6

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
GREATER JOHNSTOWN SCHOOL DISTRICT	SPOUSE SALARY	\$65,832
U.S. HOUSE OF REPRESENTATIVES	CONGRESSMAN STAFF EMPLOYEE	\$22,514

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MARK S CRITZ

Page 3 of 6

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
JT CHECKING, FIRST NATIONAL BANK	\$1,001 - \$15,000	None	NONE	
FEDERAL THRIFT SAVINGS PLAN	\$100,001 - \$250,000	None	NONE	
SP JOHNSTOWN SCHOOL EMPLOYEES CU	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JOHNSTOWN SCHOOLS EMPLOYEES CU	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP METLIFE PAID UP INSURANCE	\$15,001 - \$50,000	None	NONE	
SP METLIFE STOCK	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MARK S CRITZ

Page 4 of 6

DC	PA 529 COLLEGE SAVINGS PLAN	\$15,001 - \$50,000	None	NONE	
DC	PA 529 COLLEGE SAVINGS PLAN	\$15,001 - \$50,000	None	NONE	
SP	PENNSYLVANIA TEACHERS SAVINGS PLAN	\$50,001 - \$100,000	None	NONE	
JT	SAVINGS BONDS	\$15,001 - \$50,000	INTEREST	\$5,001 - \$15,000	S(part)
DC	SAVINGS, FIRST NATIONAL BANK	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC	SAVINGS, FIRST NATIONAL BANK	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	UNCASHED SAVINGS BONDS	\$1,001 - \$15,000	INTEREST	NONE	
SP	UNCASHED SAVINGS BONDS	\$1,001 - \$15,000	INTEREST	NONE	
JT	UNCASHED SAVINGS BONDS	\$1,001 - \$15,000	INTEREST	NONE	
JT	UNCASHED SAVINGS BONDS	\$15,001 - \$50,000	INTEREST	NONE	
JT	UNCASHED SAVINGS BONDS	\$1,001 - \$15,000	INTEREST	NONE	

SCHEDULE IV - TRANSACTIONS

Name MARK S CRITZ

Page 5 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	SAVINGS BONDS	S(part)	No	VARIOUS	\$15,001 - \$50,000

SCHEDULE VIII - POSITIONS

Name MARK S CRITZ

Page 6 of 6

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TREASURER, UNCOMPENSATED	JOHNSTOWN OLDTIMERS BASEBALL ASSOCIATION

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

Form A
For use by Members, officers, and employees

Page 1 of 7

LEGISLATIVE RESOURCE CENTER

2011 MAY 13 AM 11:18

U.S. HOUSE OF REPRESENTATIVES

Name: ALLYSON Y. SCHWARTZ

Daytime Telephone: 202-225-6661

HAND DELIVERED
(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>PA</u> District: <u>13</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____
Report Type	<input checked="" type="checkbox"/> Annual (May 16, 2011)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date: _____

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

[illegible]

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name

ALLYSON Y. SCHWARTZ

Page 3 of 7

BLOCK A Asset and/or Income Source			BLOCK B Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.</p> <p>For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.</p>			<p>Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.</p> <p>If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."</p>												<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>							<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>											<p>Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
			A	B	C	D	E	F	G	H	I	J	K	L	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	<p>If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.</p> <p>P, S, E</p>
SP, DC, JT	Examples:	SP	Mega Corp. Stock																														
			Simon & Schuster																														
			1st Bank of Paducah, KY Accounts																														
JT			Fidelity Growth+Income		X																												
JT			Fidelity Equity II		X																												
JT			Fidelity Magellan		X																												
JT			Windsor II - Vanguard		X																												
JT			Health Care - Vanguard		X																												
JT			PA Tax-Exempt Money Market - Vanguard	X																													

For additional assets and unearned income, use next page.

SCHEDULE III—ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name ALLYSON Y. SCHWARTZ

Page 4 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction	
		A	B	C	D	E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P, S, E
		None	\$1 – \$1,000	\$1,001 – \$15,000	\$15,001 – \$50,000	\$50,001 – \$100,000	\$100,001 – \$250,000	\$250,001 – \$500,000	\$500,001 – \$1,000,000	\$1,000,001 – \$5,000,000	\$5,000,001 – \$25,000,000	\$25,000,001 – \$50,000,000	Over \$50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify: e.g. Partnership Income or Farm Income)	None	\$1 – \$200	\$201 – \$1,000	\$1,001 – \$2,500	\$2,501 – \$5,000	\$5,001 – \$15,000	\$15,001 – \$50,000	\$50,001 – \$100,000	\$100,001 – \$1,000,000	\$1,000,001 – \$5,000,000	Over \$5,000,000	
JT	Franklin Templeton - Mutual Deacon			X											X			X					X									
	Vanguard 500 Index			X											X			X					X									
	Lincoln Fixed Asset			X															Retirement				X									
	Lincoln Delaware Bond				X														"						X							
	Lincoln Delaware Growth & Income				X														"						X							
	Lincoln Delaware Social Awareness					X													"						X							
	Lincoln Delaware Special Opportunities				X														"							X						
	Lincoln Texas Capital Appreciation		X																"					X								
	Schwab - T. Rowe Price Small Cap					X													"								X					
	Commonwealth of PA - Deferred Compensation					X													"							X						
	Vanguard 500 Index					X													"							X						
SP	Fidelity Fund						X												"								X					
SP	Schwab Mutual Deacon						X												"								X					
SP	Schwab 500				X														"						X							
SP	Schwab - T. Rowe Price Small Cap					X													"								X					
SP	Wells Fargo Bonds					X													"							X						
SP	PNC Bank - Fidelity Aberdeen Freedom					X													"							X						
SP	Israeli Bonds			X															"				X									
SP	Vanguard Health Care					X													"						X							
SP	Vanguard 500 Index					X													"							X						
SP	Vanguard US Growth				X														"					X								

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ALLYSON Y. SCHWARTZ

Page 5 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A	B	C	D	E	F	G	H	I	J	K	L							I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P, S, E	
		None	\$1 - \$1,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify: e.g. Partnership Income or Farm Income)	None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	\$1,000,001 - \$5,000,000		Over \$5,000,000
SP	Black Rock	X																Retirement					X								Sold (S)	
SP	TIAA/CREF Fixed Accounts			X														"			X											
SP	TIAA/CREF Growth Income			X														"			X											
SP	TIAA/CREF Social Choice			X														"			X											
SP	WHS - Vanguard 500				X													"				X										
SP	WHS - Vanguard Morgan				X													"				X										
SP	WHS - Vanguard US Growth			X														"			X											
SP	Vanguard Wellington					X												"			X											
SP	Vanguard Wellington				X													"				X										
SP	TIAA/CREF Real Estate					X												"							X							
SP	TIAA/CREF Social Choice					X												"						X								
SP	T-C Life Cycle				X													"					X									
SP	First Service Williams Co - 23rd St. Properties					X											X	Real Estate Limited Partner						X								
JT	House - 3 Gospel Path, Truro, MA							X										Rental		X												
JT	PNC BANK - Checking Accts				X											X				X												
SP	VANGUARD Target Retirement Fund 2010					X												"		X										P		

SCHEDULE IV— TRANSACTIONS

Name

ALYSON Y. SCHWARTZ

Page

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (i.e., partial sale).** See example below.

Capital Gains — If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.

Type of Transaction

PURCHASE
SALE
EXCHANGE

Check Box if Capital Gain Exceeded \$200

Date

(MO/DAY/YR)
or
Quarterly,
Monthly, or
Bi-weekly, if
applicable

Amount of Transaction

A \$1,001-\$5,000
B \$5,001-\$15,000
C \$15,001-\$50,000
D \$50,001-\$100,000
E \$100,001-\$250,000
F \$250,001-\$500,000
G \$500,001-\$1,000,000
H \$1,000,001-\$5,000,000
I \$5,000,001-\$25,000,000
J Over \$25,000,000

SP, DC, JT

Asset

SP Example: Mega Corporation Common Stock (partial sale)

SP Black Rock 500 (Rollover)
SP Vanguard Target Retirement 2010 Fund (Rollover from Black Rock 500)

SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

[illegible]

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 5
For use by Members, officers, and employees

HAND DELIVERED

Michael F. Doyle, Jr.

202-225-2135

(Full Name)

(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2011 MAY 16 PM 3:20

(Office Use Only)

Filer Status

☒ Member of the U.S. House of Representatives
State: PA
District: 14

☐ Officer Or Employee

Employing Office:

Report Type

☒ Annual (May 15) ☐ Amendment ☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (a.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts--</p>	<p>Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions--</p>	<p>Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

SCHEDULE I - EARNED INCOME

Name Michael F. Doyle, Jr.

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Eastgate Insurance Agency, Inc.	Renewal Commission	\$11,000
Doyle for Congress Committee	Spouse Salary	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael F. Doyle, Jr.

Page 3 of 5

<p>BLOCK A</p> <p>Asset and/or Income Source</p> <p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or more in a personal checking or</p>	<p>BLOCK B</p> <p>Year-End Value of Asset</p> <p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>BLOCK C</p> <p>Type of Income</p> <p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>BLOCK D</p> <p>Amount of Income</p> <p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>BLOCK E</p> <p>Transaction</p> <p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
<p>1916 Monongahela Avenue Pittsburgh, PA</p>	<p>\$50,001 - \$100,000</p>	<p>RENT</p>	<p>\$15,001 - \$50,000</p>	
<p>Eastgate Insurance Agency (45% Owner)</p>	<p>\$15,001 - \$50,000</p>	<p>None</p>	<p>NONE</p>	
<p>SERS-Commonwealth of Pennsylvania</p>	<p>\$100,001 - \$250,000</p>	<p>None</p>	<p>NONE</p>	

SCHEDULE V - LIABILITIES

Name Michael F. Doyle, Jr.

Page 4 of 5

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Allegheny Valley Bank of Pittsburgh	November 2005	Mortgage on 1916 Monongahela Avenue	\$50,001 - \$100,000
	Sallie Mae	December 2002	Parent Plus College Loans	\$15,001 - \$50,000
	Capital One Credit Card	December 2010	Revolving Credit	\$10,001 - \$15,000

SCHEDULE VIII - POSITIONS

Name Michael F. Doyle, Jr.

Page 5 of 5

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Secretary/Treasurer	Eastgate Insurance Agency

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 5
 For use by Members, officers, and employees

HAND DELIVERED

JOSEPH RUSSELL PITTS
 (Full Name)

610-444-4581
 (Daytime Telephone)

LEGISLATIVE RESOURCE CENTER
 MC 2011 MAY 10 PM 3:25
 (Office Use Only)

Filer Status

☒ Member of the U.S. House of Representatives
 State: PA
 District: 16

☐ Officer Or Employee
 Employing Office:

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

SCHEDULE I - EARNED INCOME

Name JOSEPH RUSSELL PITTS

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
COMMONWEALTH OF PENNSYLVANIA EMPLOYEE RETIREMENT SYSTEM	LEGISLATIVE PENSION	\$90,867
TIAA RETIREMENT ANNUITY	SPOUSE RETIREMENT	\$2,991
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY	IRA DISTRIBUTION	\$10,810

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name JOSEPH RUSSELL PITTS

Page 3 of 5

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the Institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or		Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
SP	CREF STOCK RETIREMENT ANNUITY	\$50,001 - \$100,000	DIVIDENDS	\$5,001 - \$15,000	
	INLAND AMERICAN REAL ESTATE TR INC - IRA	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
	MASS MUTUAL - MML AMERICAN FUNDS CORE ALLOCATION-IRA	\$250,001 - \$500,000	DIVIDENDS	\$5,001 - \$15,000	
SP	NATIONAL PENN BANK	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	PRIME FUND-CAPITAL RESERVES CLASS-IRA	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	TIAA TRADITIONAL RETIREMENT ANNUITY	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name JOSEPH RUSSELL PITTS

Page 4 of 5

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
CLUB FOR GROWTH	Mar. 5-7	DC-PALM BEACH-DC	Y	Y	N	NONE
HERITAGE FOUNDATION	Jan. 14-16	DC-CHARLOTTEVILLE, VA- DC	Y	Y	Y	NONE

SCHEDULE VIII - POSITIONS

Name JOSEPH RUSSELL PITTS

Page 5 of 5

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
BOARD OF REFERENCE	CHINA OUTREACH MINISTRIES
ADVISORY BOARD MEMBER	CROSSLINKS
ADVISORY BOARD MEMBER	CONGRESSIONAL YOUTH LEADERSHIP COUNCIL
ADVISORY BOARD MEMBER	FREE NORTH KOREA RADIO, USA
ADVISORY BOARD MEMBER	INTERNATIONAL HEALTH SERVICES BOARD
HONORARY BOARD MEMBER	JOURNAL FOR ELECTRONIC DEFENSE
ADVISORY BOARD MEMBER	SAT-7
ADVISORY BOARD MEMBER	STEPHEN'S CHILDREN (MAGGIE GOBRAN'S ORGANIZATION IN EGYPT)
ADVISORY BOARD MEMBER	U.S.COMMITTEE FOR HUMAN RIGHTS IN NORTH KOREA
ADVISORY BOARD MEMBER	VIETNAM EDUCATION FOUNDATION
ADVISORY BOARD MEMBER	WESTERN SAHARA FOUNDATION
ADVISORY BOARD MEMBER	MATTHEW J. RYAN PROJECT AT VILLANOVA UNIVERSITY

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 6
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER

2011 MAY 16 PM 4:04

HAND DELIVERED

Tim Holden
(Full Name)

(202)225-5546
(Daytime Telephone)

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: PA District: 17	<input type="checkbox"/> Officer Or Employee	Employing Office:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
	Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule I.	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VI.
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule II.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VII.
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule III.	VIII. Did you hold any reportable position on or before the date of filing in the current calendar year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule VIII.
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, complete and attach Schedule IV.	IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule IX.
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, complete and attach Schedule V.	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts—	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions—	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

Name Tim Holden

Page 2 of 6

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
County of Schuylkill	spouse salary	\$17,299.83
Schuylkill County Retirement System	pension	\$19,288.02

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Tim Holden

Page 3 of 6

<p>BLOCK A</p> <p>Asset and/or Income Source</p> <p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or</p>	<p>BLOCK B</p> <p>Year-End Value of Asset</p> <p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>BLOCK C</p> <p>Type of Income</p> <p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>BLOCK D</p> <p>Amount of Income</p> <p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>BLOCK E</p> <p>Transaction</p> <p>indicate if asset had purchases (P), sales (S), or exchange (E) exceeding \$1,000 in reporting year.</p>
Banco Santander S.A.	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
Blackrock Global Allocation Fund Class A M/F (MDLOX)	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000	P
Capitol One Money Market	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
Currencysavers Australian DLR Australian Dollar SH	None	DIVIDENDS	NONE	S
Ishares Barclays Treas Inflation Protected sec TTIPS	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
Ishares Barclays US AGGR Bond	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Tim Holden

Page 4 of 6

	Ishares Comex Gold Trust	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Ishares Dow Jones US Aerospace&Defense Index FD	None	Dividends	NONE	S
	Ishares Iboxx \$ Investop Investment Grade Corp FD	None	DIVIDENDS	\$1 - \$200	S
JT	M &T Bank, One South Centre, Pottsville, PA 17901	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	PA Tax Free Fund, Insured Long Term Bond	\$15,001 - \$50,000	Other: (Tax free income)	\$201 - \$1,000	
	Raymond James Bank Fund (formerly Dreyfus Money Market Fund)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP	Schuylkill County Employees Retirement System	\$50,001 - \$100,000	NA	NONE	
	Schuylkill Federal Employees Credit Union	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	Susquehanna Bancshares Inc	\$1 - \$1,000	DIVIDENDS	NONE	
JT	Van Guard Energy Fund	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Vanguard BD Index FD Inc Intermediate Term BD ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Vanguard Bond Index Funds Short Term Bond ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Vanguard Emerging Markets ETF	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Vanguard Growth	None	DIVIDENDS	NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Tim Holden

Page 5 of 6

	Vanguard Small Cap ETF	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Vanguard Total Stock Market ETF	\$1 - \$1,000	INTEREST	\$1 - \$200	P
JT	VMMR Prime Money Market Fund	\$100,001 - \$250,000	DIVIDENDS	\$1 - \$200	
JT	Windsor II Voyager VanGuard(Windsor II Stocks)	\$50,001 - \$100,000	DIVIDENDS/CAPIT AL GAINS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name Tim Holden

Page 6 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during this reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain In Excess of \$200?	Date	Amount of Transaction
	Blackrock Global Allocation Fund Class A M/F (MDLOX)	P	N/A	7/27/10	\$1,001 - \$15,000
	Currencyshares Australian DLR Australian Dollar SH	S	No	05/28/10	\$1,001 - \$15,000
	Isahres Iboxx\$ Investop Investment Grade Corp FD	S	No	9/23/10	\$1,001 - \$15,000
	Ishares Dow Jones US Aerospace&Defense Index FD	S	No	4/22/10	\$1,001 - \$15,000
	Vanguard Growth	S	No	5/28/10	less than \$1000
	Vanguard Total Stock Market ETF	P	N/A	9/23/10	less than \$1000

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 1 of 12
For use by Members, officers, and employees

Timothy F. Murphy
(Full Name)

412-344-5583
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

JUN -6 AM 9:18

HAND DELIVERED

(Office Use Only)

A \$200 penalty shall
be assessed against
anyone who files
more than 30 days
late.

Filer
Statue

☒ Member of the U.S.
House of Representatives State: PA
District: 18

☐ Officer Or
Employee Employing Office:

Report
Type

☒ Annual (May 15) ☐ Amendment ☐ Termination

Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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SCHEDULE I - EARNED INCOME

Name Timothy F. Murphy

Page 2 of 12

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Bombardier	Spouse Salary	N/A
Intercare Psychiatric Services	Spouse Salary	N/A
Commonwealth of PA State Employees Ret. Syst	Pension	\$8,700

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Timothy F. Murphy

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<p>BLOCK A</p> <p>Asset and/or Income Source</p> <p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or</p>	<p>BLOCK B</p> <p>Year-End Value of Asset</p> <p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>BLOCK C</p> <p>Type of Income</p> <p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>BLOCK D</p> <p>Amount of Income</p> <p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>BLOCK E</p> <p>Transaction</p> <p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
Vanguard Health Care ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Growth Fund of America	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
American Beacon Large Cap Value	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Baron Growth	\$1,001 - \$15,000	None	NONE	
Artisan Small Cap Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Thornburg International Value	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Timothy F. Murphy

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	Lazard Emerging Markets Equity	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	Calamos Market Neutral Income	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Credit Suisse Commodity Return Strategy	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Pimco Low Duration	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Dodge & Cox Income	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Pimco Total Return	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Vanguard Interm-Term Corporate Bond	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	Loomis Sayles Bond	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Pimco Developing Local Markets	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	JP Morgan US Govt Money Market	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	JP Morgan Chase Structured Note	None	INTEREST	\$5,001 - \$15,000	S
	Vanguard Health Care ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Growth Fund of America	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	American Beacon Large Cap Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Timothy F. Murphy

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	Baron Growth	\$1,001 - \$15,000	None	NONE	
	Artisan Small Cap Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Thornburgh International Value	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
	Lazard Emerging Markets Equity	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Calamos Market Neutral Income	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Credit Suisse Commodity Return Strategy	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Pimco Low Duration	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	Pimco Total Return	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Vanguard Interm-Term Corporate Bond	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	Loomis Sayles Bond	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Pimco Developing Local Markets	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	JP Morgan US Govt Money Market	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	JP Morgan Chase Structured Note	None	INTEREST	\$2,501 - \$5,000	S
JT	Harbor Capital Appreciation	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Timothy F. Murphy

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JT	American Beacon Large Cap Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Thornburg International Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Pimco Total Return	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
JT	Baron Growth	None	None	NONE	S
JT	Pimco Low Duration	None	DIVIDENDS	\$1 - \$200	S
JT	American Beacon Small Cap Value	None	None	NONE	S
	Bayou City Exploration	\$1 - \$1,000	None	NONE	
JT	Insured Cash Account	\$1 - \$1,000	INTEREST	\$1 - \$200	
SP	Vanguard Health Care ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	Growth Fund of America	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	American Beacon Large Cap Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Vanguard Small Cap ETF	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Thornburg International Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	Gateway Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Timothy F. Murphy

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SP	Pimco Low Duration	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	P
SP	Pimco Total Return	\$1,001 - \$15,000	DIVIDENDS/INTEREST	\$201 - \$1,000	
SP	Loomis Sayles Bond	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	Pimco Emerging Local Bond	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	Arbitrage Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	Insured Cash Account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
SP	Vanguard Growth ETF	None	DIVIDENDS	\$1 - \$200	S
SP	Optimum Large Cap Growth C	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	P
SP	Optimum Large Cap Value C	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
SP	Optimum Small Cap Growth C	\$1,001 - \$15,000	None	NONE	
SP	Optimum Small Cap Value C	\$1,001 - \$15,000	None	NONE	
SP	Optimum International C	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Optimum Fixed Income C	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	Insured Cash Account	None	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Timothy F. Murphy

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SP	Optimum Large Cap Growth C	None	DIVIDENDS	NONE	S
SP	Optimum Large Cap Value C	None	DIVIDENDS	\$1 - \$200	S
SP	Optimum Small Cap Growth C	None	None	NONE	S
SP	Optimum Small Cap Value C	None	None	NONE	S
SP	Optimum Internaitonal C	None	DIVIDENDS	\$1 - \$200	S
SP	Optimum Fixed Income C	None	DIVIDENDS	\$1 - \$200	S
SP	Insured Cash Account	None	INTEREST	\$1 - \$200	

SCHEDULE IV - TRANSACTIONS

Name Timothy F. Murphy

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Report any purchases, sale, or exchanges by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	JP Morgan Chase Structured Note	S	N/A	06-30-10	\$1,001 - \$15,000
JT	Harbor Capital Appreciation	S(part)	Yes	03-19-10	\$1,001 - \$15,000
JT	Baron Growth	S	Yes	03-19-10	\$1,001 - \$15,000
JT	Pimco Low Duration	S	No	03-19-10	\$1,001 - \$15,000
JT	American Beacon Small Cap Value	S	Yes	03-19-10	\$1,001 - \$15,000
SP	Vanguard Health Care ETF	P	N/A	04-30-10	\$1,001 - \$15,000
SP	Growth Fund of America	P	N/A	04-30-10	\$1,001 - \$15,000
SP	Thornburg International Value	P	N/A	04-30-10	\$1,001 - \$15,000
SP	Gateway Fund	P	N/A	04-30-10	\$1,001 - \$15,000
SP	Pimco Low Duration	P	N/A	04-30-10	\$1,001 - \$15,000
SP	Loomis Sayles Bond	P	N/A	04-30-10	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

Name Timothy F. Murphy

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, atocks, bonds, commodities futures, or other securitiea when the amount of the transaction exceeded \$1,000. Include transactlona that resulted in a loa. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your peraonal residence, unless it is rented out. If only a portion of an asset is aold, plsase so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
SP	Pimco Emerging Local Bond	P	N/A	04-30-10	\$1,001 - \$15,000
SP	Arbitrage Fund	P	N/A	05-03-10	\$1,001 - \$15,000
SP	Vanguard Growth ETF	S	N/A	04-30-10	\$1,001 - \$15,000
SP	Optimum Large Cap Growth C	P	N/A	04-16-10	\$1,001 - \$15,000
SP	Optimum Large Cap Value C	P	N/A	04-16-10	\$1,001 - \$15,000
SP	Optimum Large Cap Growth C	S	N/A	12-23-10	\$1,001 - \$15,000
SP	Optimum Large Cap Value C	S	N/A	12-23-10	\$1,001 - \$15,000
SP	Optimum Small Cap Growth C	S	N/A	12-23-10	\$1,001 - \$15,000
SP	Optimum Small Cap Value C	S	N/A	12-23-10	\$1,001 - \$15,000
SP	Optimum Internaitonal C	S	N/A	12-23-10	\$1,001 - \$15,000
SP	Optimum Fixed Income C	S	N/A	12-23-10	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

Name Timothy F. Murphy

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See examples below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	JP Morgan Chase Structured Note	S	N/A	06-30-10	\$1,001 - \$15,000

SCHEDULE VIII - POSITIONS

Name Timothy F. Murphy

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Western Pennsylvania Historical Society (uncompensated)
Board Member	Pittsburgh Children's Museum (uncompensated)
Board Member	Pittsburgh Public Theater (uncompensated)
Adjunct Professor	University of Pittsburgh (uncompensated)

**UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT**

Form A
For use by Members, officers, and employees

Page 1 of 5

Name:

Todd R. Platts

Daytime Telephone:

(202) 225-5836

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Member of the U.S. House of Representatives

State:

PA

District:

19



Officer or Employee

Employing Office:

Report Type



Annual (May 16, 2011)



Amendment



Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
If yes, complete and attach Schedule I.

Yes



No



VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?
If yes, complete and attach Schedule VI.

Yes



No



II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
If yes, complete and attach Schedule II.

Yes



No



VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)?
If yes, complete and attach Schedule VII.

Yes



No



III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?
If yes, complete and attach Schedule III.

Yes



No



VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
If yes, complete and attach Schedule VIII.

Yes



No



IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?
If yes, complete and attach Schedule IV.

Yes



No



IX. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule IX.

Yes



No



V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?
If yes, complete and attach Schedule V.

Yes



No



Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes



No



EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes



No



List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

[illegible]

SCHEDULE III—ASSETS AND “UNEARNED” INCOME

Name

Todd R. Plath

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BLOCK A

Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in “unearned” income during the year.

Provide complete names of stocks and mutual funds (do not use ticker symbols.)

For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.

For rental or other real property held for investment, provide a complete address.

For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.

For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.

SP, DC, JT
Examples: SP Mega Corp. Stock
Simon & Schuster
1st Bank of Paducah, KY Accounts

BLOCK B

Value of Asset

Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold during the reporting year and is included only because it generated income, the value should be “None.”

A B C D E F G H I J K L

None
\$1 – \$1,000
\$1,001 – \$15,000
\$15,001 – \$50,000
\$50,001 – \$100,000
\$100,001 – \$250,000
\$250,001 – \$500,000
\$500,001 – \$1,000,000
\$1,000,001 – \$5,000,000
\$5,000,001 – \$25,000,000
\$25,000,001 – \$50,000,000
Over \$50,000,000

BLOCK C

Type of Income

Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the “None” column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check “None” if the asset generated no income during the reporting period.

NONE
DIVIDENDS
RENT
INTEREST
CAPITAL GAINS
EXCEPTED/BLIND TRUST
Other Type of Income (Specify: e.g., Partnership Income or Farm Income)

BLOCK D

Amount of Income

For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the “None” column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check “None” if no income was earned or generated.

None
\$1 – \$200
\$201 – \$1,000
\$1,001 – \$2,500
\$2,501 – \$5,000
\$5,001 – \$15,000
\$15,001 – \$50,000
\$50,001 – \$100,000
\$100,001 – \$1,000,000
\$1,000,001 – \$5,000,000
Over \$5,000,000

BLOCK E

Transaction
Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

If only a portion of an asset is sold, please indicate as follows:
(S) (partial)
See below for example.
P, S, E

DC1 Susquehanna Bank Acct
DC2 Susquehanna Bank Acct
DC Capital World Growth + Income Fund
DC Capital World Growth + Income Fund
DC The Income Fund of America
DC The Income Fund of America

X
X
X
X
X
X

X
X
X
X
X
X

X
X
X
X
X
X

S (partial)

SCHEDULE III—ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name Todd R. Platt

Page 4 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction	
		A	B	C	D	E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P, S, E	
		None	\$1 – \$1,000	\$1,001 – \$15,000	\$15,001 – \$50,000	\$50,001 – \$100,000	\$100,001 – \$250,000	\$250,001 – \$500,000	\$500,001 – \$1,000,000	\$1,000,001 – \$5,000,000	\$5,000,001 – \$25,000,000	\$25,000,001 – \$50,000,000	Over \$50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED AND TRUST	Other Type of Income (Specify: e.g. Partnership Income or Farm Income)	None	\$1 – \$200	\$201 – \$1,000	\$1,001 – \$2,500	\$2,501 – \$5,000	\$5,001 – \$15,000	\$15,001 – \$50,000	\$50,001 – \$100,000	\$100,001 – \$1,000,000	\$1,000,001 – \$5,000,000	Over \$5,000,000		
	Thornburg Value Fund			X										X							X												S
	Allianz NPS Dividend Value Fund	X												X							X												S
	Growth Fund of America			X											X							X											
	ASBA 5-Star Sci. + Tech. Fund	X												X							X												S
	Eagle mid Cap Growth Fund			X										X							X												
	Columbia Seligman Growth + Int'l Fund			X										X							X												D
	Thornburg Investment Income Builder Fund			X											X							X											D
	Susquehanna Bank Acct #1				X									X							X												
	Susquehanna Bank Acct #2			X										X							X												
	Raymond James Bank Dep Acct	X												X							X												

SCHEDULE IV— TRANSACTIONS

Name

Todd R. Platts

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. **If only a portion of an asset is sold, please so indicate (i.e., "partial sale").** See example below.

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the “capital gains” box and disclose this income on Schedule III.

[illegible]